

Clerk of the House of Representatives  
Legislative Resource Center  
B-106 Cannon Building  
Washington, DC 20515

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, DC 20510

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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration A-27-1

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Organization CERNER CORPORATION

Address 2800 ROCKCREEK PKWY

City KANSAS CITY State MO Zip 64117

4. Principal place of business (if different than line 3)

City — State \_\_\_\_\_ Zip \_\_\_\_\_

5. Telephone number and contact name Prefix Full Name

816-201-7022 Contact Mrs. AMANDA ADKINS E-mail AMANDA.ADKINS@CERNER.COM

6. General description of registrant's business or activities

HEALTHCARE & INFORMATION TECHNOLOGY

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10.* ☒ Self

7. Client name

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

8. Principal place of business (if different than line 7)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

9. General description of client's business or activities

## LOBBYISTS

Go to page 3 to add more

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person has served as a "covered executive branch official" or "covered legislative branch official" within two years of becoming a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name			Covered Official Position (if applicable)
First	Last	Suffix	
AMANDA	ADKINS		DIRECTOR OF GOVERNMENT AFFAIRS
DISTIE	PROFIT		FEDERAL GOVERNMENT AFFAIRS SPECIALIST



Registrant Name AMANDA ADKINSClient Name CERNER CORPORATION**LOBBYING ISSUES**

Find the code to select below.

Go to page 3 to add more or

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1,

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12. Specific lobbying issues (current and anticipated)

HEALTHCARE & INFORMATION TECHNOLOGY**AFFILIATED ORGANIZATIONS**

Go to page 3 to add more or

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?



No ⇒ Go to line 14.



Yes ⇒

Complete the rest of this section for each entity matching criteria above, then proceed to line 14.

Name	Address	Principal place of Business (city and state or country)

**FOREIGN ENTITIES**

Go to page 3 to add more or

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13: **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome lobbying activity?



No ⇒ Sign and date the registration.



Yes ⇒

Complete the rest of this section for each entity matching the criteria above, then sign and date registration.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street Address	City	State/Province Country		

AMANDA ADKINS,

Form Co

Printed Name and Title

Amanda Adkins DIR. OF GOVERNMENT & INC



AMANDA ADKINS

Registrant Name

Client Name CERNER CORPORA

**ADDITIONAL LOBBYISTS**

Return to page 2 to finish

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

First	Name		Covered Official Position (if applicable)
	Last	Suffix	
DISTIE	PROFIT		FEDERAL GOV. AFFAIRS SPECI

**ADDITIONAL LOBBYING ISSUES**

Return to page 2 to finish

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

Find the code to select below.

HCR

**AFFILIATED ORGANIZATIONS**

Return to page 2 to finish

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

Name	Address	Principal place of business (city and state or country)

**ADDITIONAL FOREIGN ENTITIES**

Return to page 2 to finish

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities	per
	Street Address City	State/Province	Country			

Add an additional supplementary information

Printed Name and Title AMANDA ADKINS, DIRECTOR OF GOV. &amp; INDUSTRY

*Amadea Atkins*

4-27-05